Iowa WIC Story

Origins of WIC

In 1972, the U.S. Congress legislated the Special Supplemental Food Program for Women, Infants and Children (WIC). Beginning as a two-year pilot project under the United States Department of Agriculture (USDA), the WIC Program linked health care and food assistance for pregnant women, breastfeeding mothers, infants and children considered at health risk because of malnutrition and low income.

After a two-year trial, the WIC program (later renamed the Special Supplemental **Nutrition** Program for Women, Infants and Children) officially began in Iowa with the first clinic opening in Davenport on March 12, 1974. In 1975, the Davenport program served approximately 1,050 at-risk women, infants and children up to the age of five years.

Today, almost 38 years later, WIC's monthly food prescription, tailored to meet the specific needs of WIC clients, is provided to more than 75,600 Iowa women, infants, and children every month. For fiscal year 2009, the Iowa WIC Program received over \$54.7 million in funding from USDA. An additional \$17.1 million dollars was received from infant formula rebates, allowing the program to serve more participants than federal funding would support.

The Iowa WIC Program positively impacts the state's economy. Over 650 grocery stores and pharmacies participate in the Iowa WIC Program and accept WIC checks for the supplemental foods. The state's farm economy is also supported. Several of the state's agricultural products are included in the WIC food package. WIC checks are used every month to buy over 2,000,000 gallons of milk, 200,000 gallons of fruit juice, and over 300,000 dozen eggs. Since October 2009 soy beverage, tofu, baby food/meats, 100% whole wheat bread, soft corn tortillas, 100% soft whole wheat tortillas, brown rice, canned legumes and cash value vouchers for the purchase of fresh and/or frozen fruits and vegetables were added to the Iowa WIC Program.

WIC is recognized as the nation's premier public health nutrition program. WIC gained this reputation and garnered strong, continued bipartisan support because of its cost-effective, scientifically documented health successes. This success can be attributed to partnerships with other health and nutrition programs, resulting in integrated service delivery and active referral linkages between programs and health providers.

Gateway to Good Health

WIC is a short-term intervention program designed to strengthen families by influencing lifetime nutrition and health behaviors in a targeted, high risk population. To participate, WIC requires that clients have one or more documented nutritional risks and incomes less than or equal to 185 percent of the federal poverty level. WIC's combination of nutrition education, nutritious foods, breastfeeding support, and referrals to healthcare provides a gateway to good health in over 146 clinics administered by 20 local agencies in the state.

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Trio of WIC Benefits

- Nutrition education and breastfeeding promotion and support
- Supplemental foods
- Referrals for regular and ongoing health care

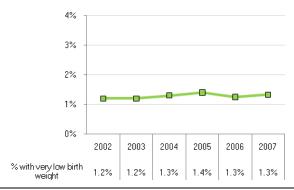
Birth Outcomes Success

Today, approximately 1 in 3 pregnant women in Iowa are enrolled in WIC. Numerous studies have shown that pregnant women who participate in WIC have longer pregnancies leading to fewer premature births, have fewer low and very low birth-weight babies, experience fewer fetal and infant deaths, seek prenatal care earlier in pregnancy and consume more of such key nutrients as iron, protein, calcium, and Vitamins A and C.

1. The Cost of Low and Very Low Birth-Weight Babies

- a. Preterm births cost U.S. over \$26 billion a year.
- b. The average first year medical costs for premature/low birth-weight baby are \$77,000 compared to \$1,700 for a baby without complications.
- c. For very low birth-weight babies, a shift of 1 pound at birth saves approximately \$28,000 in first year medical costs.
- d. Medicaid costs are reduced on average between \$12,000 and \$15,000 for every very low birth-weight incident prevented.

Percent of very low birth-weight infants (< 1500 grams) among all live births



Data Source: Vital statistics. Data are available annually. (Iowa)

2. Prenatal Care Saves Money

- a. It costs approximately \$708 a year for a pregnant woman to participate in WIC.
- b. Prenatal WIC benefits reduce the rate of low birth-weight babies by 25% and very low birth-weight babies by 44%.
- c. Prenatal WIC participation is associated with an increase of 6.6 oz for low birth-weight babies.
- d. Every dollar spent on pregnant women in WIC produces \$1.92 to \$4.21 in Medicaid savings for newborns and their mothers.

Breastfeeding Success

WIC promotes breastfeeding as the preferred method of infant feeding. WIC mothers who breastfeed their infants are provided information and support through counseling and breastfeeding educational materials. They receive a greater quantity and variety of foods and are eligible longer to participate in WIC than non-breastfeeding mothers. Breastfeeding mothers may receive follow-up support through peer counselors. Breastfeeding mothers in WIC have access to breast pumps and other aides to help support the initiation and continuation of breastfeeding. Breastfeeding helps mothers feel close to their babies. Breast milk contains all of the nutrients needed to grow and develop. Breastfeed infants are healthier because they receive antibodies from the breast milk that protect against infection. Breastfeeding reduces health care costs by reducing the frequency of office visits, hospitalizations, and prescriptions for three common

Pregnant women participating in WIC receive prenatal care earlier

WIC reduces fetal deaths and infant mortality

WIC reduces low birth weight rates and increases the duration of pregnancy

illnesses – lower respiratory tract illnesses, otitis media, and gastrointestinal illness. Breastfeeding also provides maternal benefits by reducing risk for osteoporosis and several types of reproductive cancer. The environment also benefits from breastfeeding through reduced costs for manufacturing and waste disposal.

The Iowa WIC Program has been a leader in breastfeeding promotion and support activities, especially in the area of community-based coalition development. Despite an environment that generally does not support a woman's choice to breastfeed, rates in Iowa continue to steadily climb. As the graph shows, there has been an increase from 59.9% in 1997 to 71.9% in 2009 in breastfeeding initiation rates.

75.0%

Iowa Breastfeeding Initiation Rates

Children's Health Success

60.0%

55.0%

50.0%

WIC enables parents to properly feed their children during critical years of growth and development, assuring normal growth, reducing levels of anemia, increasing immunization rates, improving access to regular care, and improving diets. Today, nearly 50 percent of all infants born in Iowa are in WIC. Nearly one in five children in the state is in WIC.

2005

2009

Studies have shown that low-income children enrolled in WIC have a lower prevalence of anemia than those who are not enrolled. Iron deficiency anemia is a nutrition problem identified by a low hemoglobin or hematocrit and is a problem that affects one in four low-income children. Adequate iron status contributes to cognitive and physical development and a child's readiness to learn. According to the Centers for Disease Control and Prevention's Pediatric Nutrition Surveillance System 8.1% of children less than 5 years of age enrolled in Iowa's WIC Program in 2008 had a low hemoglobin or hematocrit. The national data which includes both WIC and non-WIC children that are participating in federally funded programs shows 15.0% of children less than 5 years of age had a low hemoglobin or hematocrit.

Four and five-year-olds whose mothers participated in WIC during pregnancy have achieved better vocabulary test scores than children who eligible mothers did not receive WIC benefits. According to one study, children who participated in WIC after their first birthday achieved better digit memory test scores than children who did not participate in WIC. Good nutritional status clearly helps children reach their full potential and be ready for school.

WIC decreases the incidence of iron deficiency anemia in children

Children enrolled in WIC are more likely to have a regular source of medical care and are better immunized

Children who receive WIC benefits demonstrate superior cognitive development Page 4

For more information:

National WIC Association www.nwica.org

USDA Food and Nutrition Services <u>www.fns.usda.gov/wic</u>

WIC Works Resource Center www.nal.usda.gov/wicworks

WIC Partnerships

The Iowa WIC Program is committed to delivering quality, effective public health services in its area of expertise – nutrition and breastfeeding education, nutritious foods and referrals to health care – for its diverse populations.

Effective public health nutrition, part of comprehensive health services, requires collaboration with other health services. The Iowa WIC Program coordinates services with multiple programs, including women's health and child health programs, immunizations, health centers, extension nutrition education programs, child care, <code>hawk-i</code>, Medicaid, Head Start, and Early Head Start, Child Health Specialty Clinics, Early ACCESS and area education agencies, Iowa Nutrition Education Network, Building and Strengthening Iowa Community Support for Nutrition and Physical Activity (BASICS), I-Smile (the Dental Home Project), nutrition and breastfeeding coalitions, and collaborates on critical nutrition issues such as obesity and food security. Given flexible approaches to partnering, cross-program eligibility, outcome research and improved nutrition benefits, the WIC Program can help more children achieve higher levels of school performance.

Building a Healthier Iowa

The Iowa WIC Program has been successful because it recognizes the far-reaching implications of proper maternal and early childhood nutrition. The individuals who originally planned the program had the foresight to combine nutrition education, nutritious foods, and healthcare referrals in a program that provided not just immediate food benefits, but education to influence eating habits for a lifetime. Dedication and hard work have brought WIC from a two-year pilot project to the premier public health nutrition program in the nation.

The Iowa WIC Program ensures that children in Iowa are ready to learn and, in turn, makes an investment in a future productive work force. As WIC continues to provide quality services to Iowa families, it is with the mission of building a stronger and healthier Iowa, and protecting and nurturing the next generation of Iowa leaders.

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